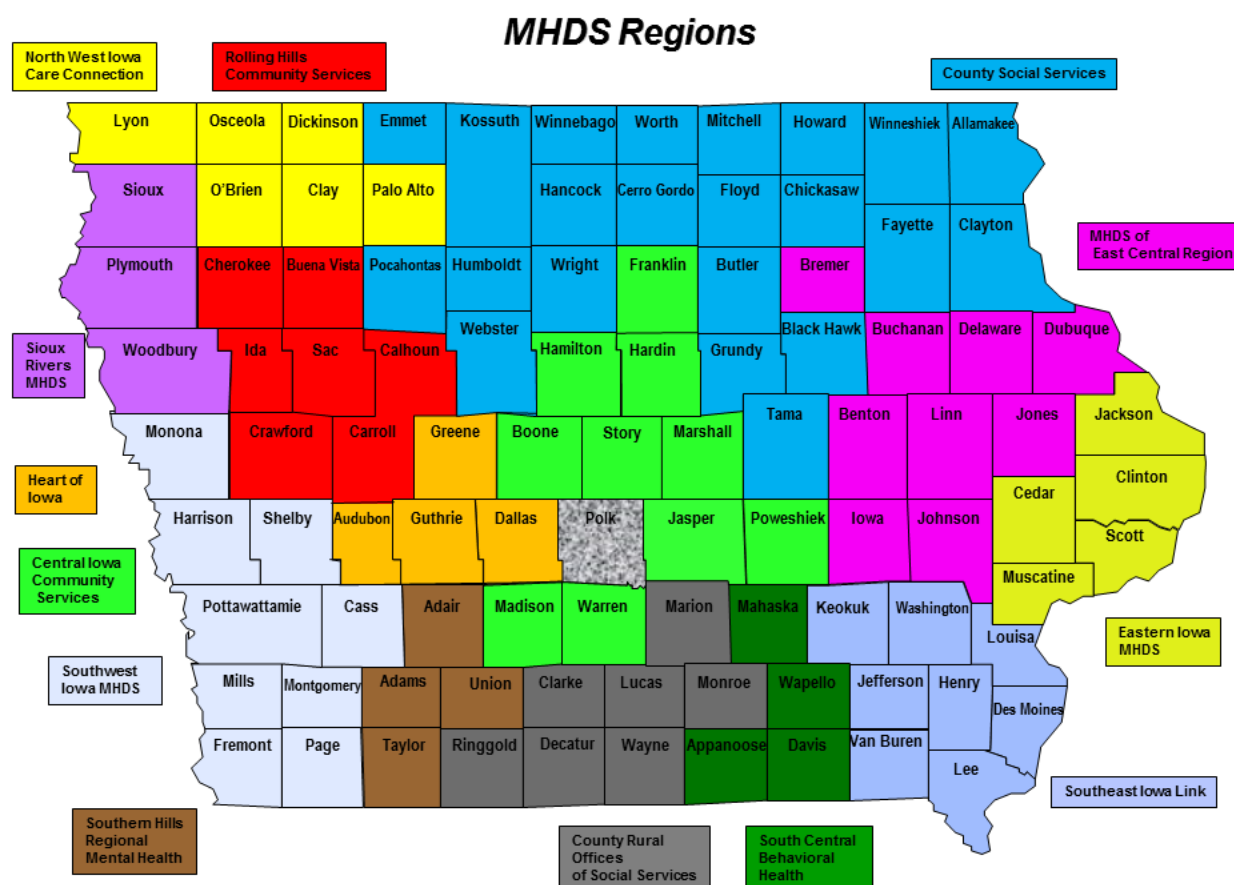




Current SFY2016 map of MHDS Regions. In SFY2015, Mahaska County and Marion County had provisional approval to operate as the Mid-Iowa Behavioral Health region. As of November 1, 2015, Mahaska County has joined South Central Behavioral Health region and Marion County has joined County Rural Offices of Social Services region.

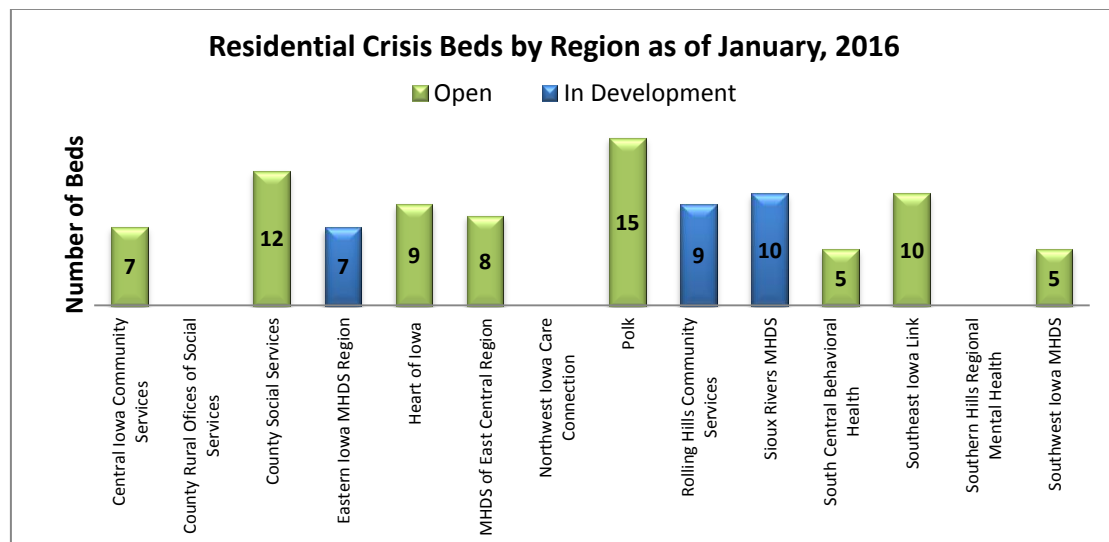
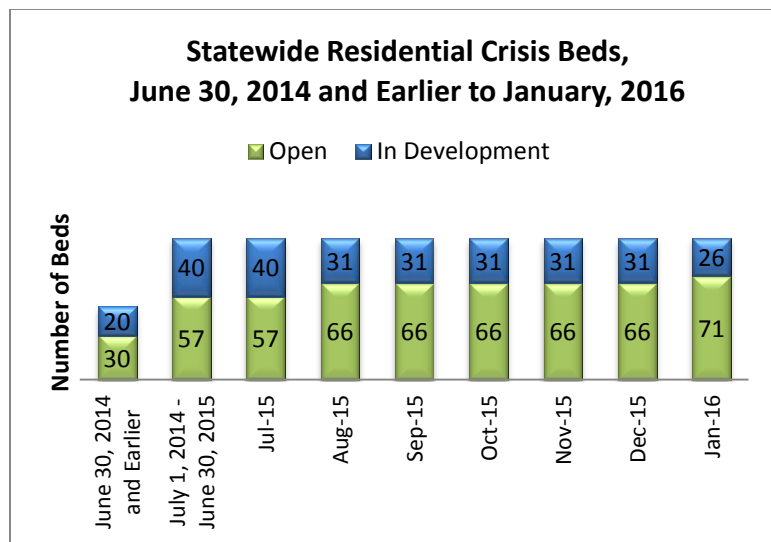


# DISCUSSION DRAFT

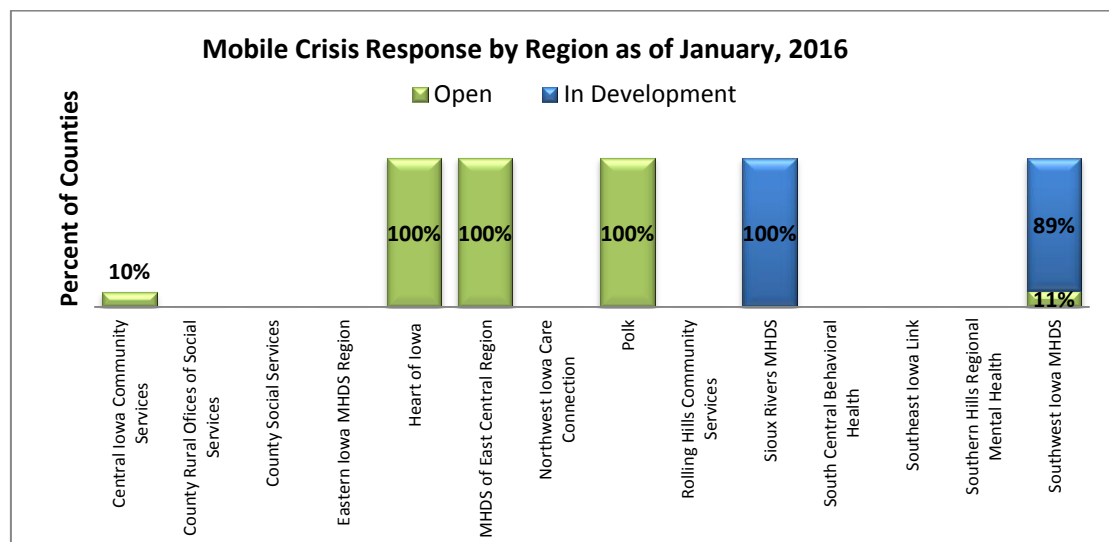
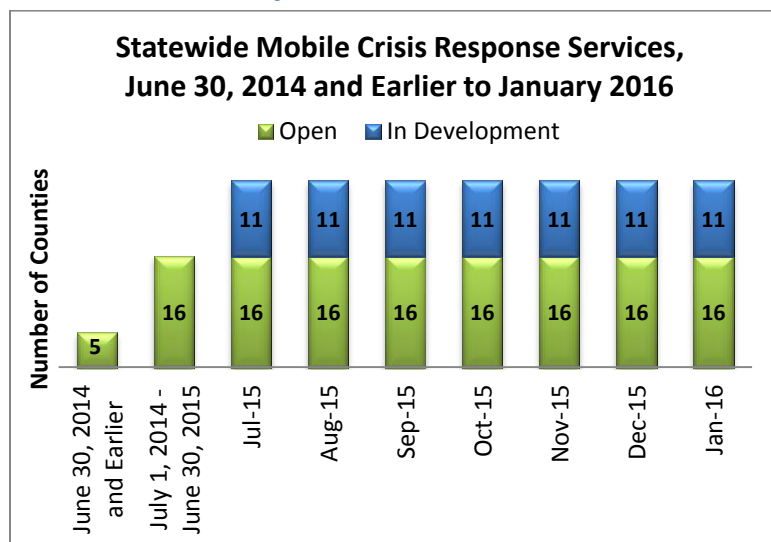
## Core Plus Mental Health and Disability Services

Data are from Regional Annual Plans and Self-Report by Regional CEOs.

### Residential Crisis Beds

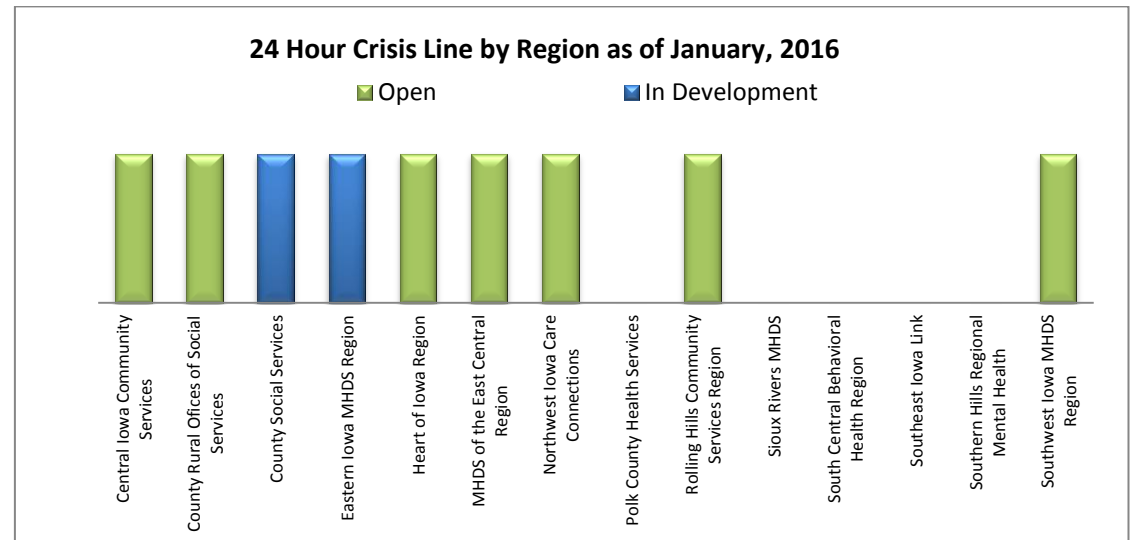
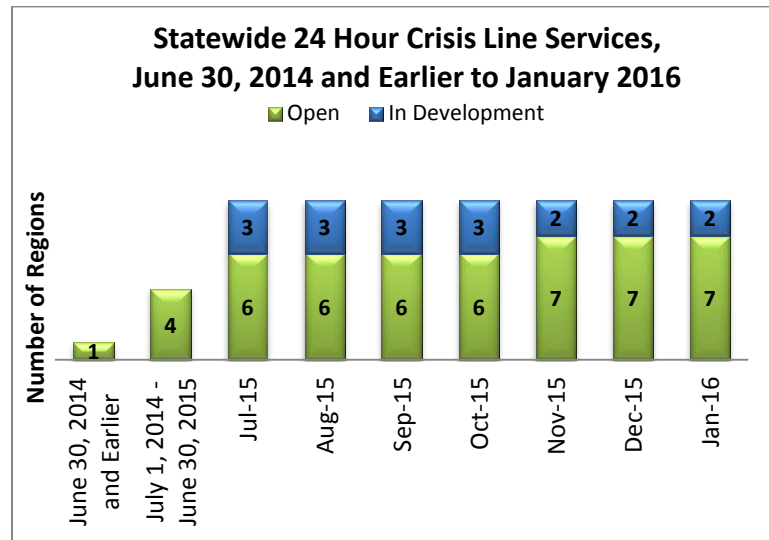


### Mobile Crisis Response

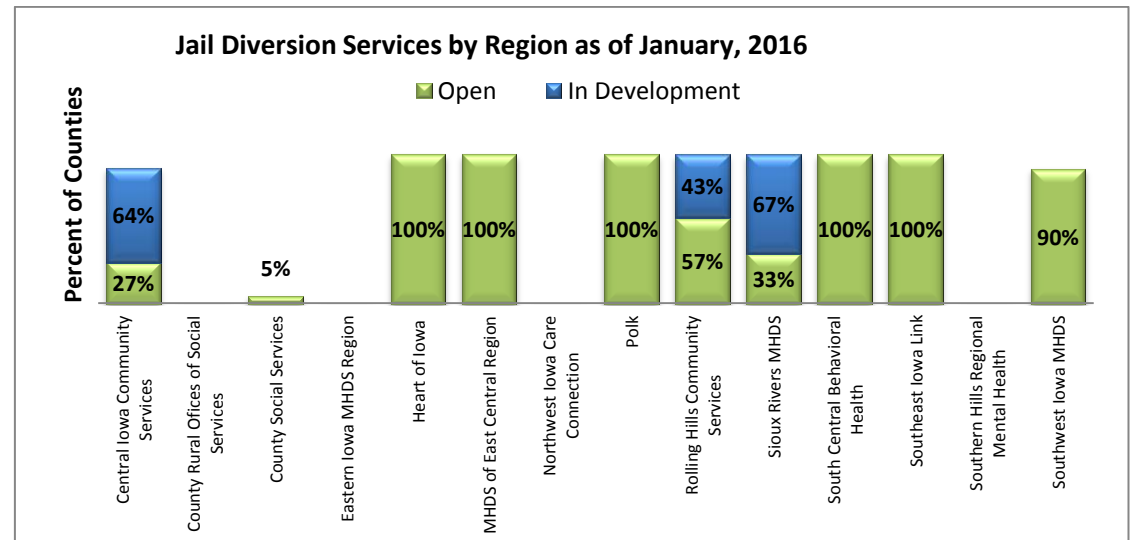
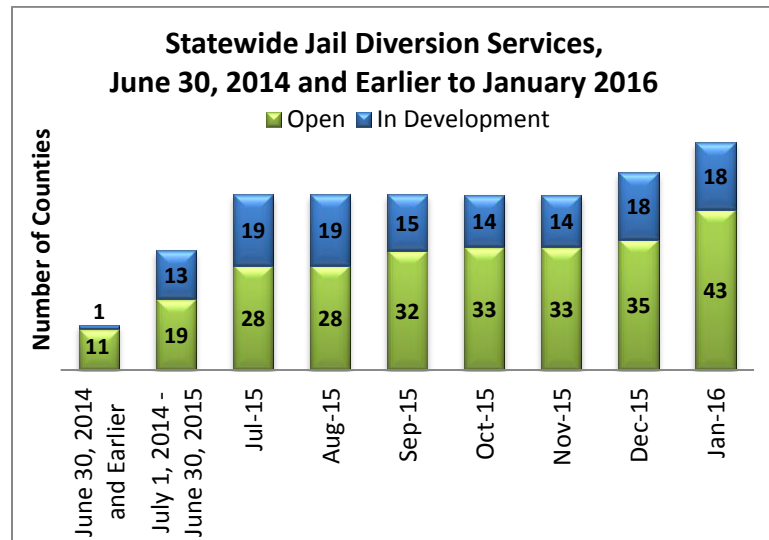


# DISCUSSION DRAFT

## 24-Hour Crisis Line



## Jail Diversion Services



# DISCUSSION DRAFT

## Assertive Community Treatment Programs

**act** = Counties with ACT program located within county

**act** = Counties with ACT program in development (\*Tentative location of ACT program in CROSS Region)

## Statewide Assertive Community Treatment Programs

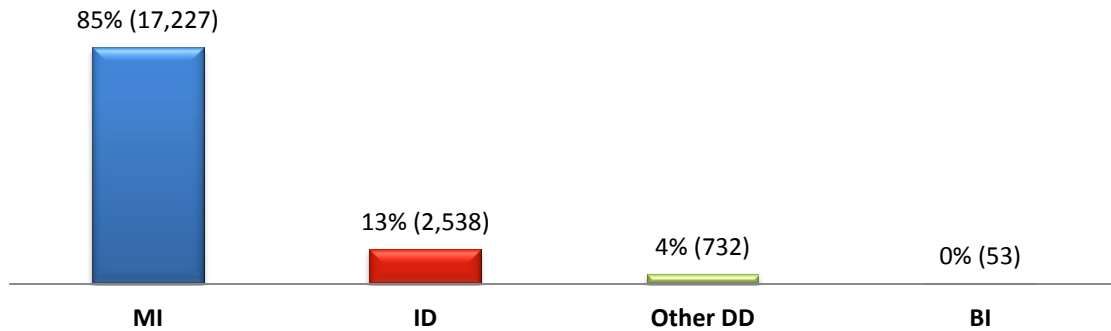


November 1, 2015

## Population

Data are from SFY2015 Regional Annual Submissions. SFY2015 Regional Annual Submission data excludes Medicaid only clients. Population data excludes submissions with a diagnosis code of 45 indicating "Case Management" and submissions for service management and mental health advocates due to inconsistencies in data reporting.

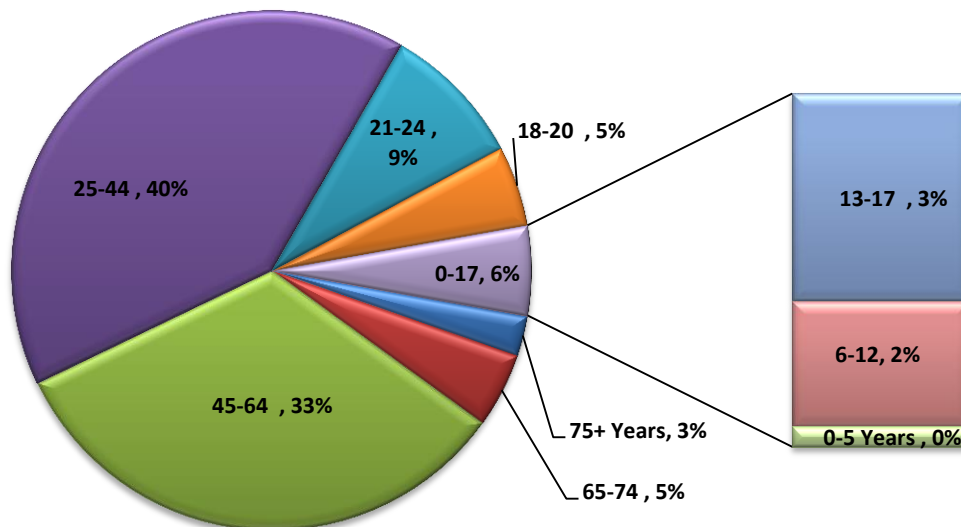
**Statewide Percent (Number) of Individuals Served by Diagnosis,  
SFY2015 (Total Unduplicated Number Served = 20,279)**



*\*Unduplicated Count Per Diagnosis;*

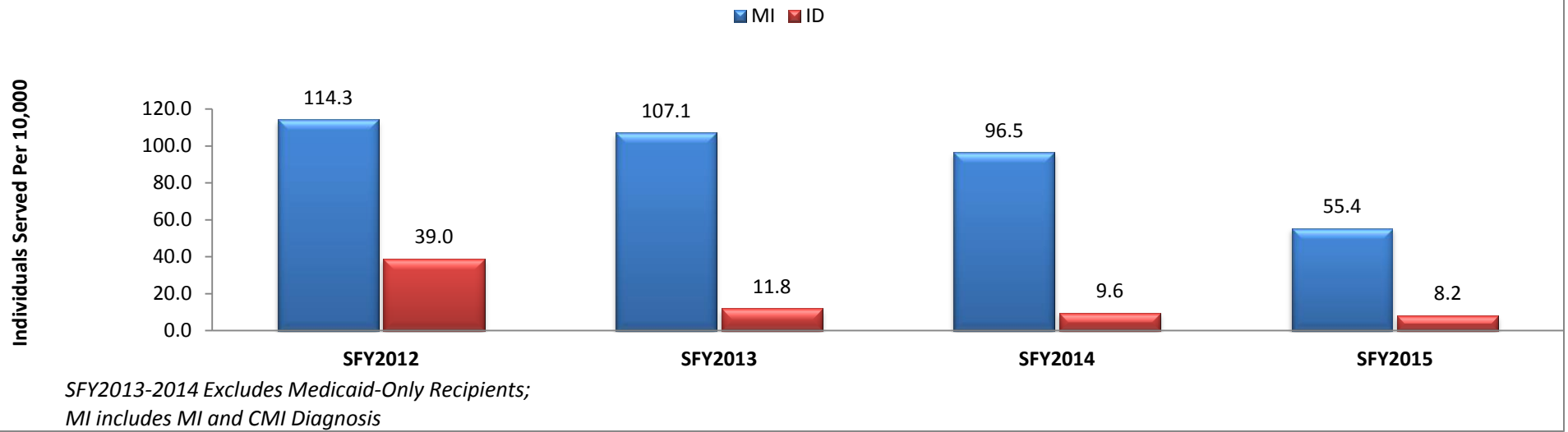
*\*MI includes MI and CMI Diagnosis*

**Statewide Individuals Served by Age, SFY2015 (Total Served = 20,279)**

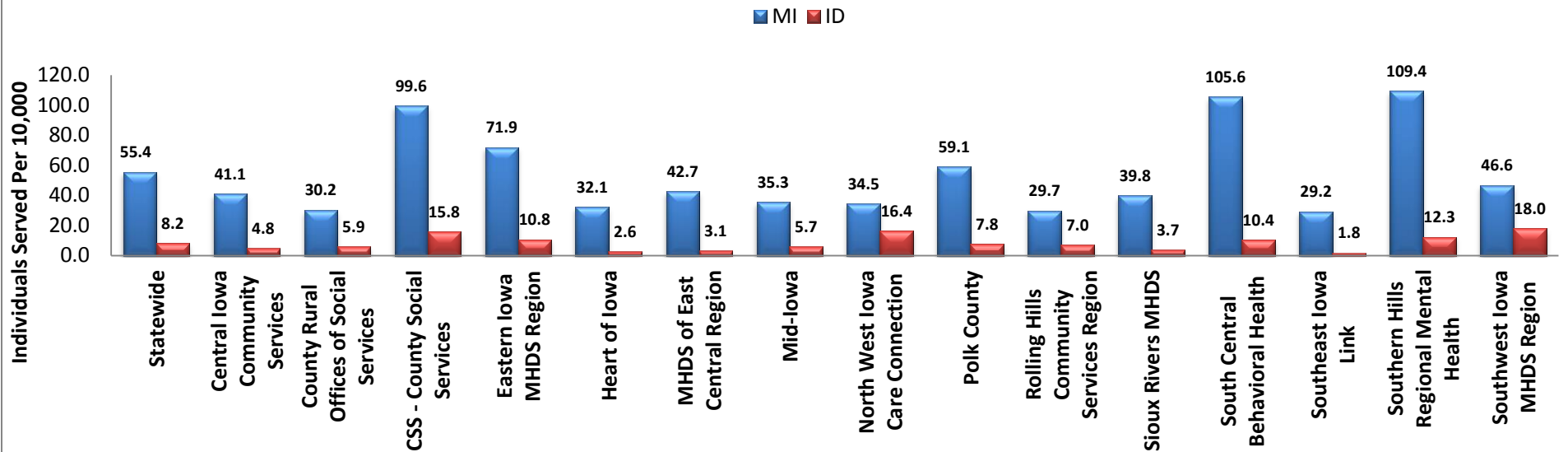


# DISCUSSION DRAFT

## Statewide Target Populations Individuals , SFY2012 - SFY2015



## Target Populations Individuals Served by Region, SFY2015



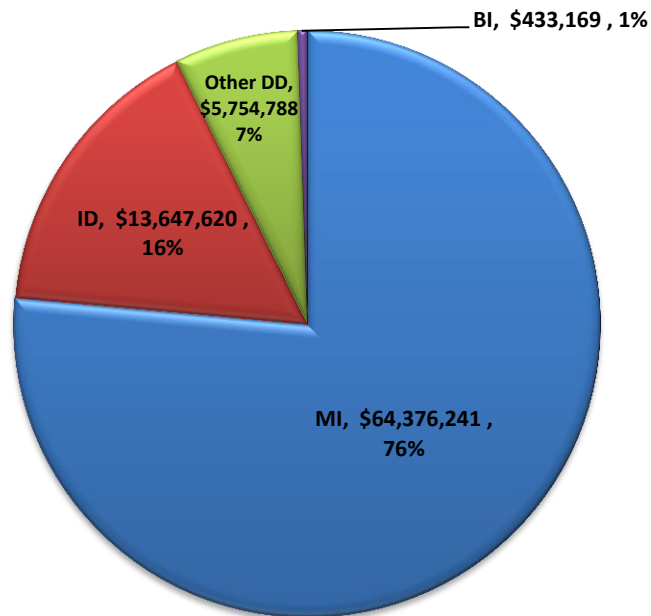
# DISCUSSION DRAFT

## Expenditures

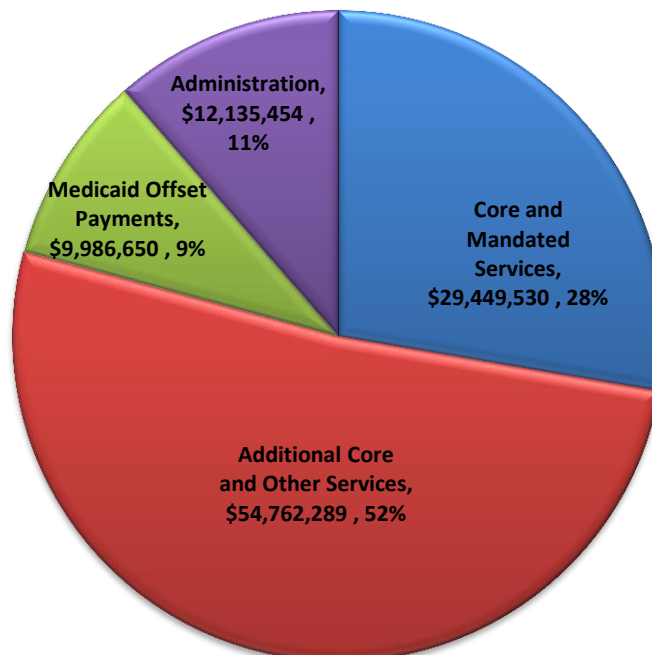
Data are from SFY2015 Regional Annual Submissions. Expenditure data excludes funds transferred between Member County Accounts and the Fiscal Agent Regional Account and submissions with a diagnosis code of 45 indicating "Case Management" with exception of 45-21375.

### Total Expenditure by Diagnosis and By Type of Service

**Statewide Expenditures by Diagnosis, SFY2015;**  
**Total Amount = \$84,211,819**  
**(Excludes Administration and Medicaid Offset Payments)**

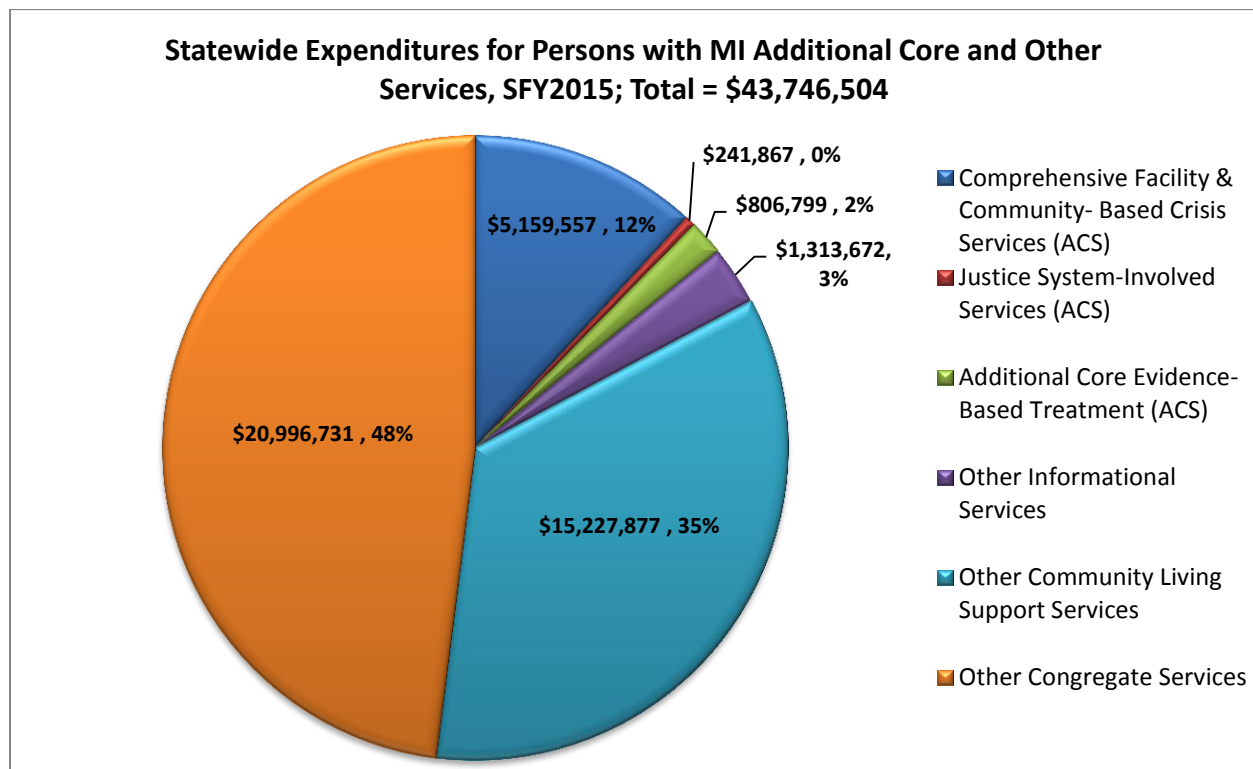
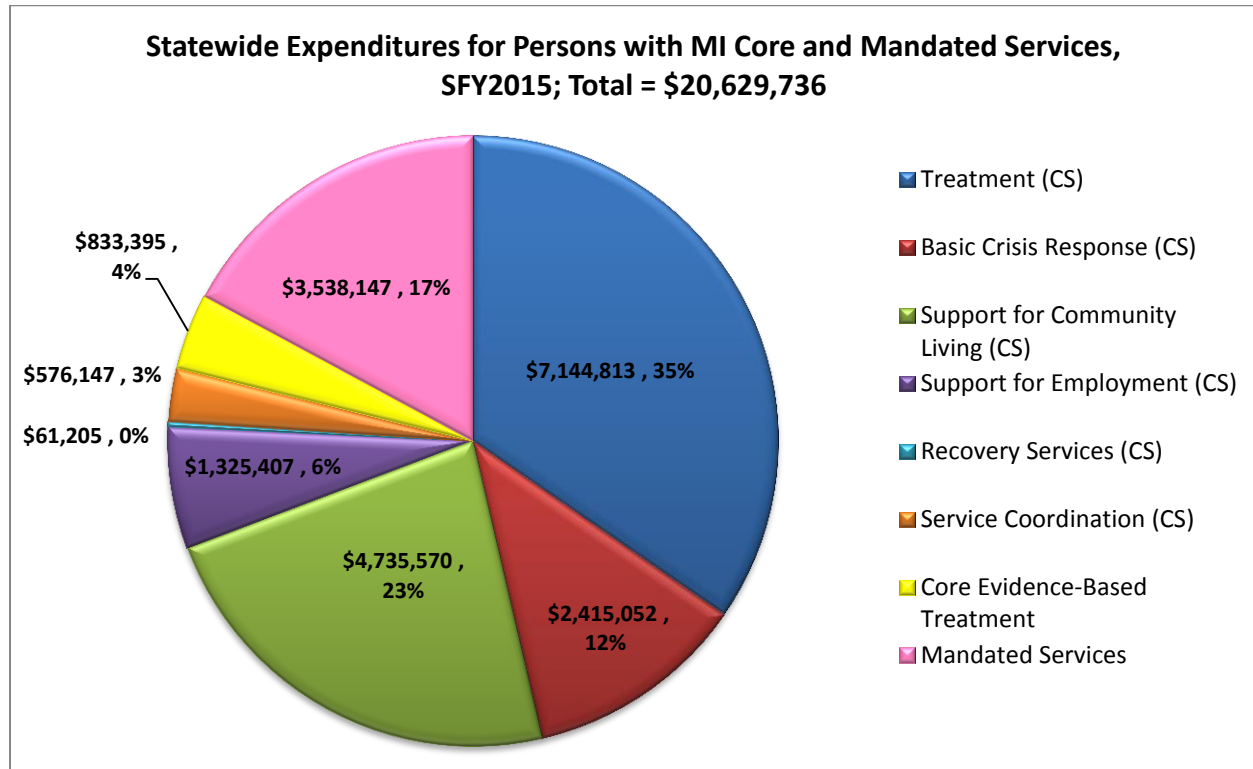


**Statewide Expenditures by Type of Service, SFY2015;**  
**Total Amount = \$106,333,923**



# DISCUSSION DRAFT

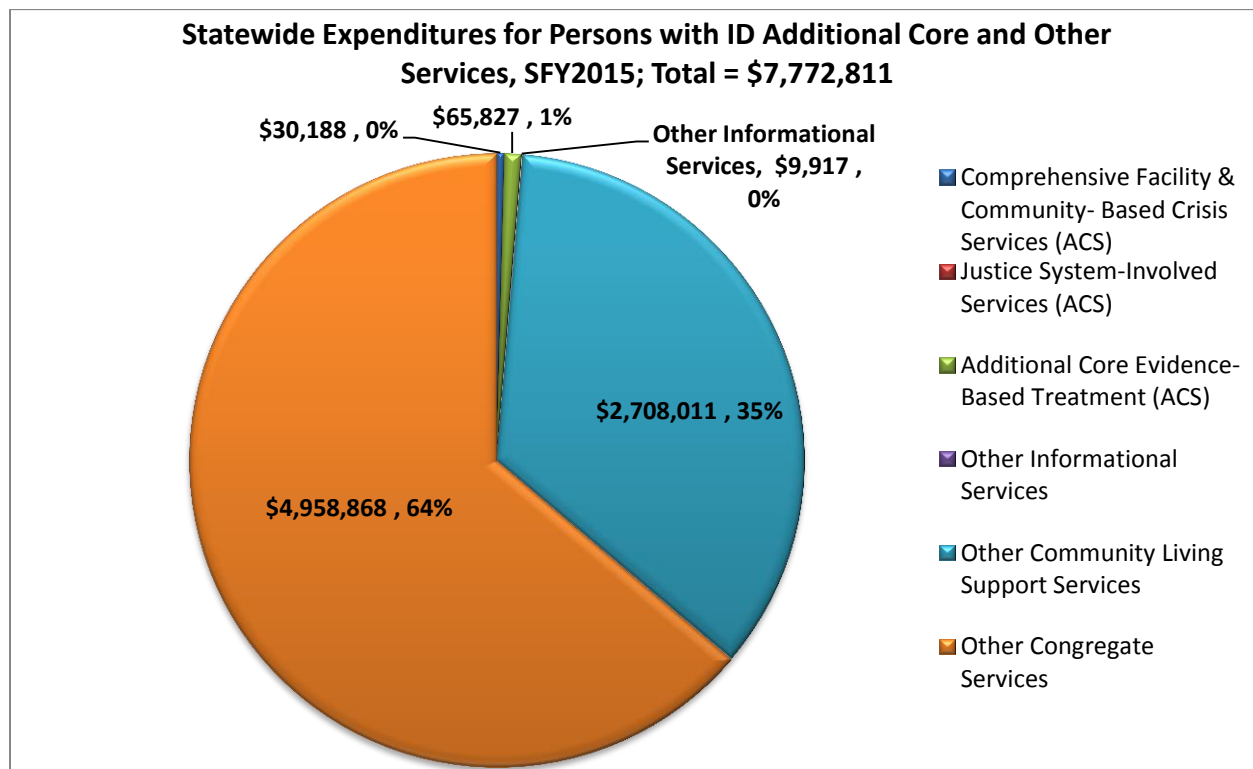
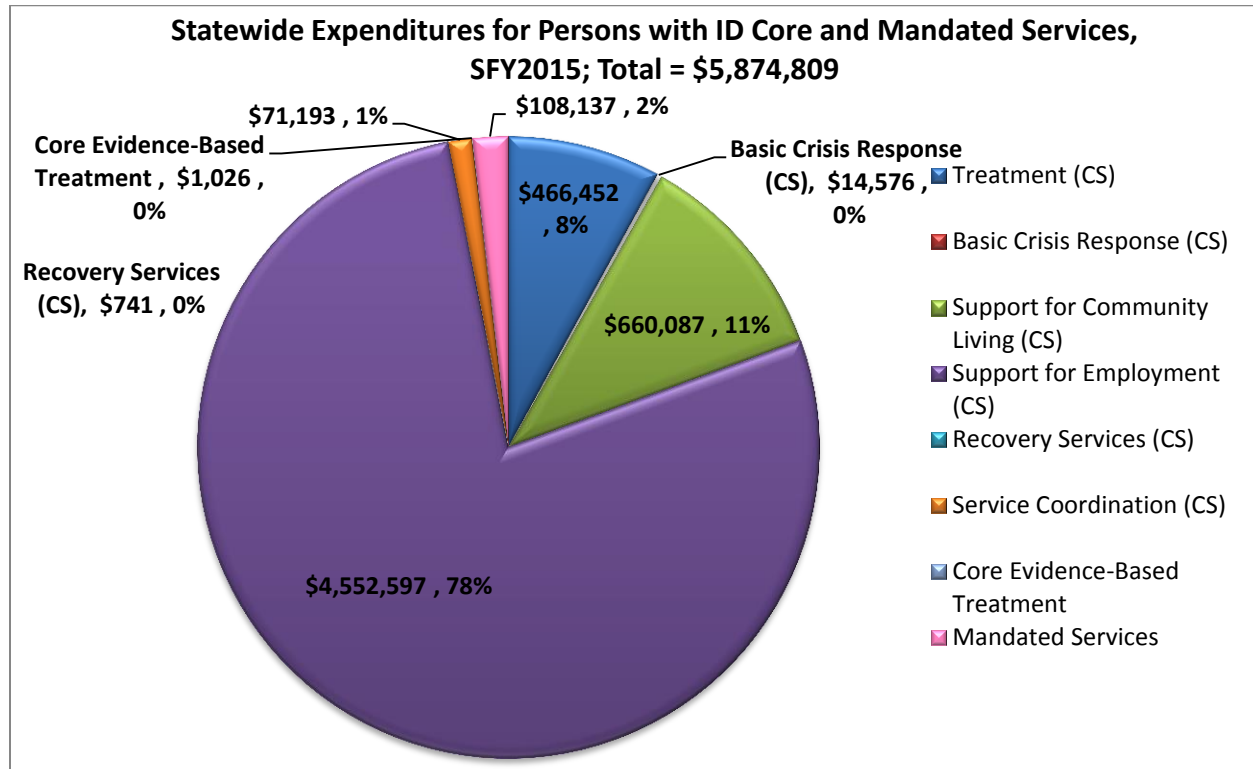
## Expenditures for Persons with MI by Type of Service





# DISCUSSION DRAFT

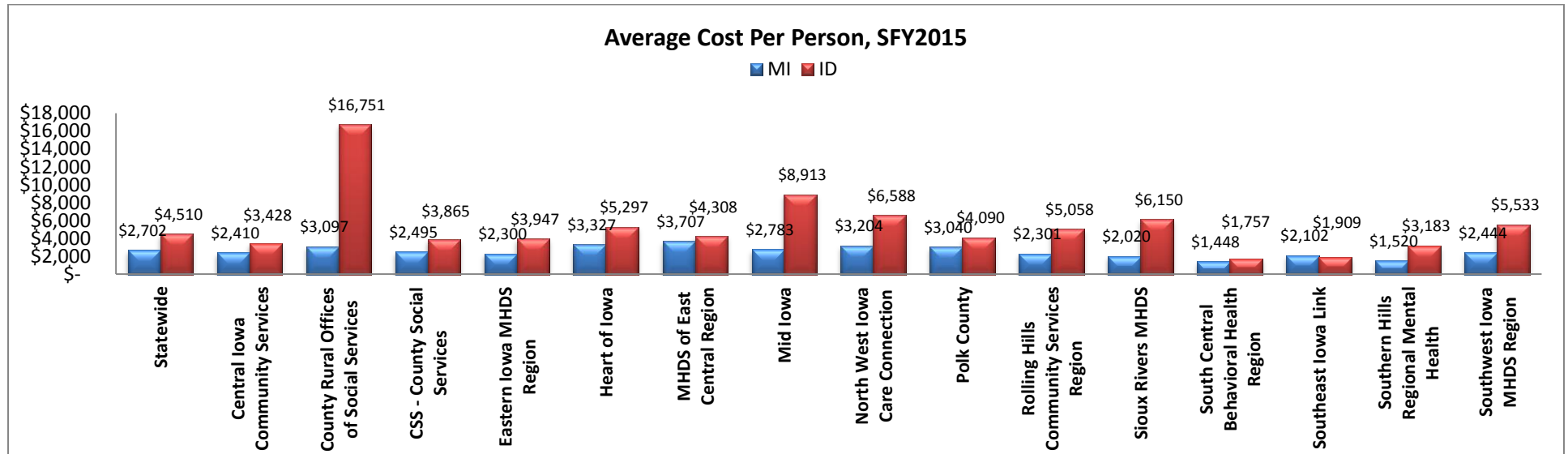
## Expenditures for Persons with ID by Type of Service



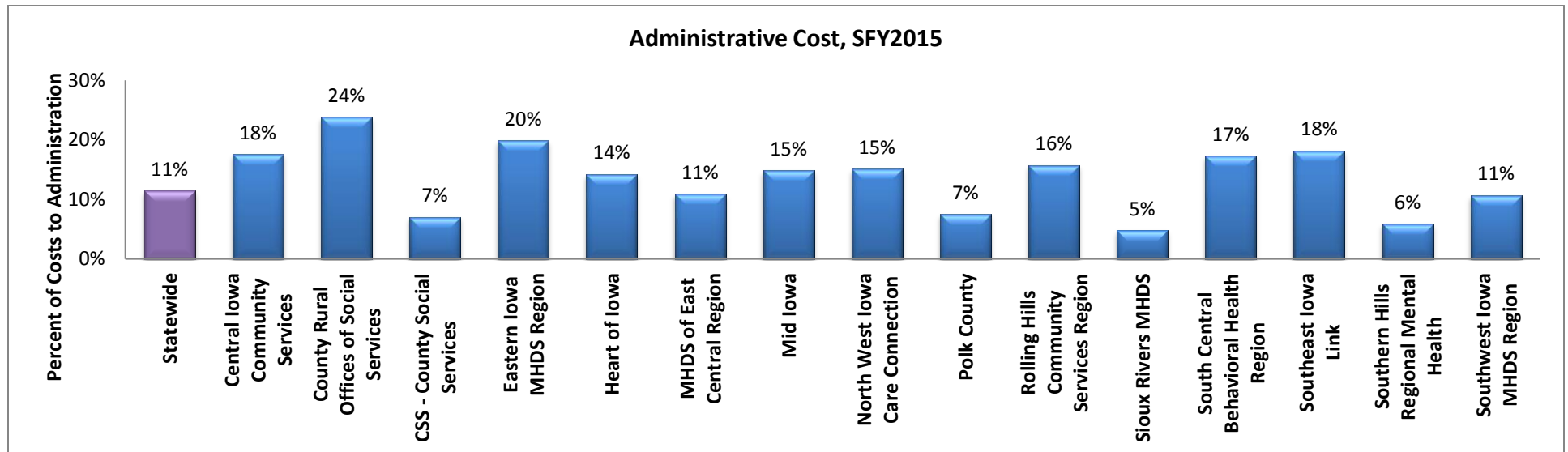
# DISCUSSION DRAFT

## Cost Per Person and Administrative Cost

Cost per person includes payments associated with a person, excluding Medicaid offset payments or funds transferred between region/member county accounts and payments for service management and mental health advocates.



Administrative costs include administrative payments, excluding Medicaid offset payments and payments or funds transferred between region/member county accounts.



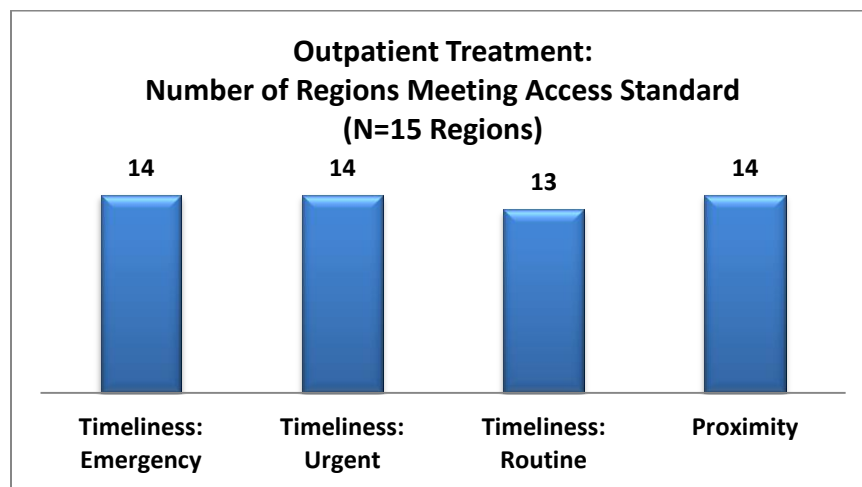
# DISCUSSION DRAFT

## Accessibility

Data are from Regional Annual Plans and Self-Report by Regional CEOs.

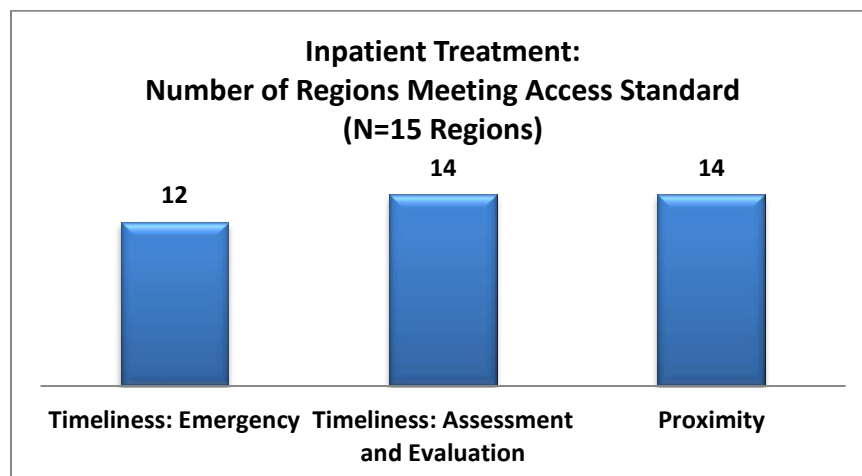
### TREATMENT: Outpatient

Access Standard	Access Standard Definition
<b>Timeliness: Emergency</b>	During an emergency, outpatient services shall be initiated to an individual within 15 minutes of telephone contact
<b>Timeliness: Urgent</b>	Outpatient services shall be provided to an individual within one hour of presentation or 24 hours of telephone contact
<b>Timeliness: Routine</b>	Outpatient services shall be provided to an individual within four weeks of request for appointment
<b>Proximity</b>	Outpatient services shall be offered within 30 miles for an individual residing in an urban community and 45 minutes for an individual residing in a rural community



### TREATMENT: Inpatient

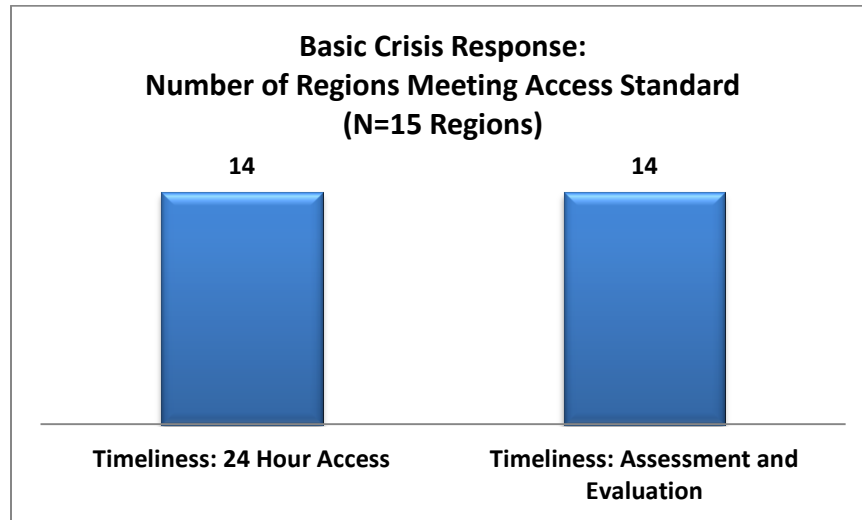
Access Standard	Access Standard Definition
<b>Timeliness: Emergency</b>	An individual in need of emergency inpatient services shall receive treatment within 24 hours
<b>Timeliness: Assessment/Evaluation</b>	An individual shall be assessed and evaluated within four weeks
<b>Proximity</b>	Inpatient services shall be within a reasonably close proximity to the region (100 miles)



# DISCUSSION DRAFT

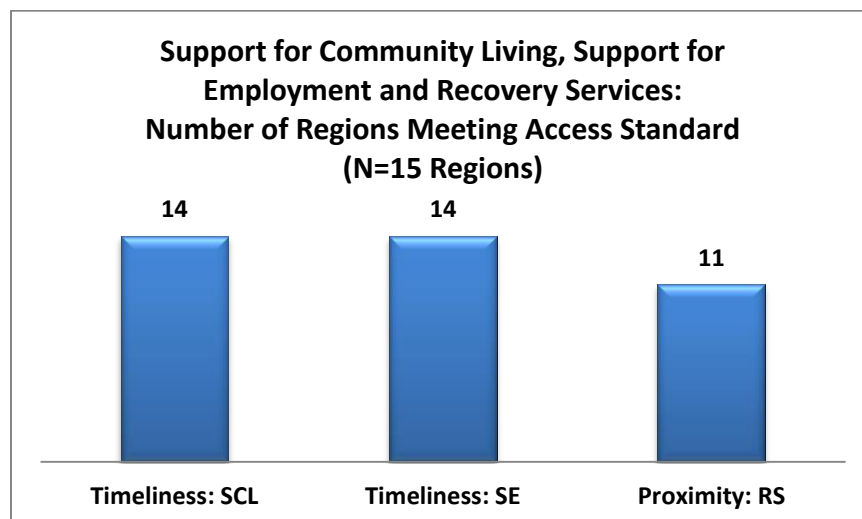
## BASIC CRISIS RESPONSE

Access Standard	Access Standard Definition
<b>Timeliness: 24 Hour Access</b>	Twenty-four-hour access to crisis services, 24 hours a day, seven days a week, 365 days per year
<b>Timeliness: Assessment/Evaluation</b>	Crisis evaluation within 24 hours



## SUPPORT FOR COMMUNITY LIVING, SUPPORT FOR EMPLOYMENT AND RECOVERY SERVICES

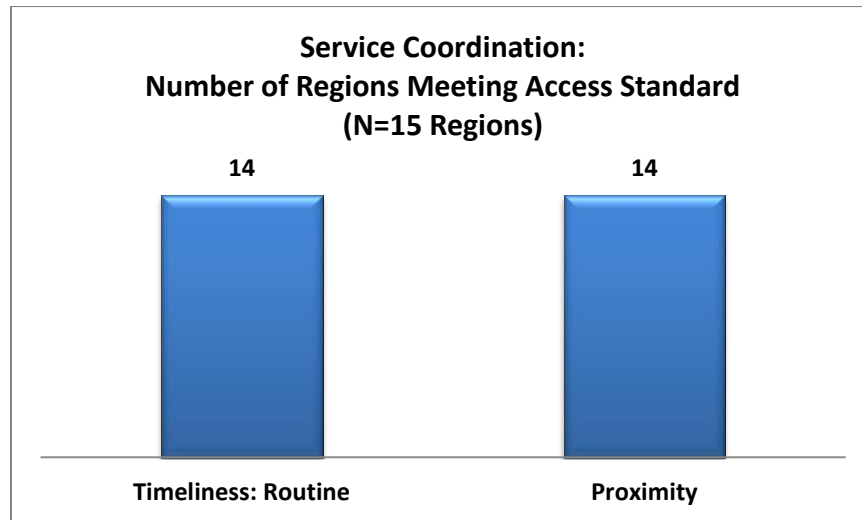
Access Standard	Access Standard Definition
<b>Timeliness: Support for Community Living (SCL)</b>	The first appointment shall occur within four weeks of the individual's request of support for community living
<b>Timeliness: Support for Employment (SE)</b>	The initial referral shall take place within 60 days of the individual's request of support for employment
<b>Proximity: Recovery Services (RS)</b>	An individual receiving recovery services shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area to receive services.



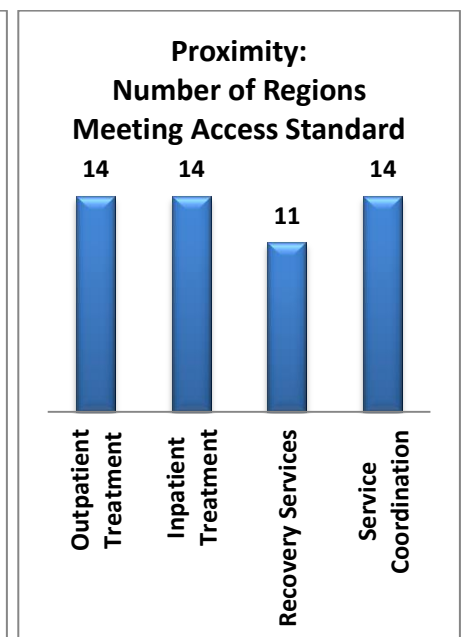
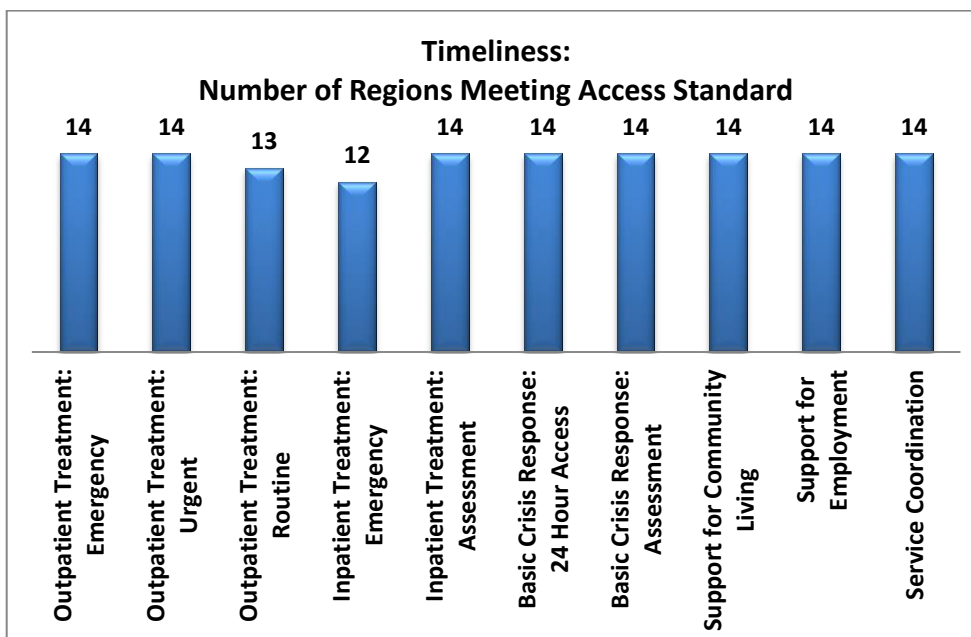
# DISCUSSION DRAFT

## SERVICE COORDINATION

Access Standard	Access Standard Definition
<b>Timeliness: Routine</b>	An individual shall receive service coordination within 10 days of the initial request for such service or being discharged from an inpatient facility
<b>Proximity</b>	An individual receiving service coordinationshall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area to receive services



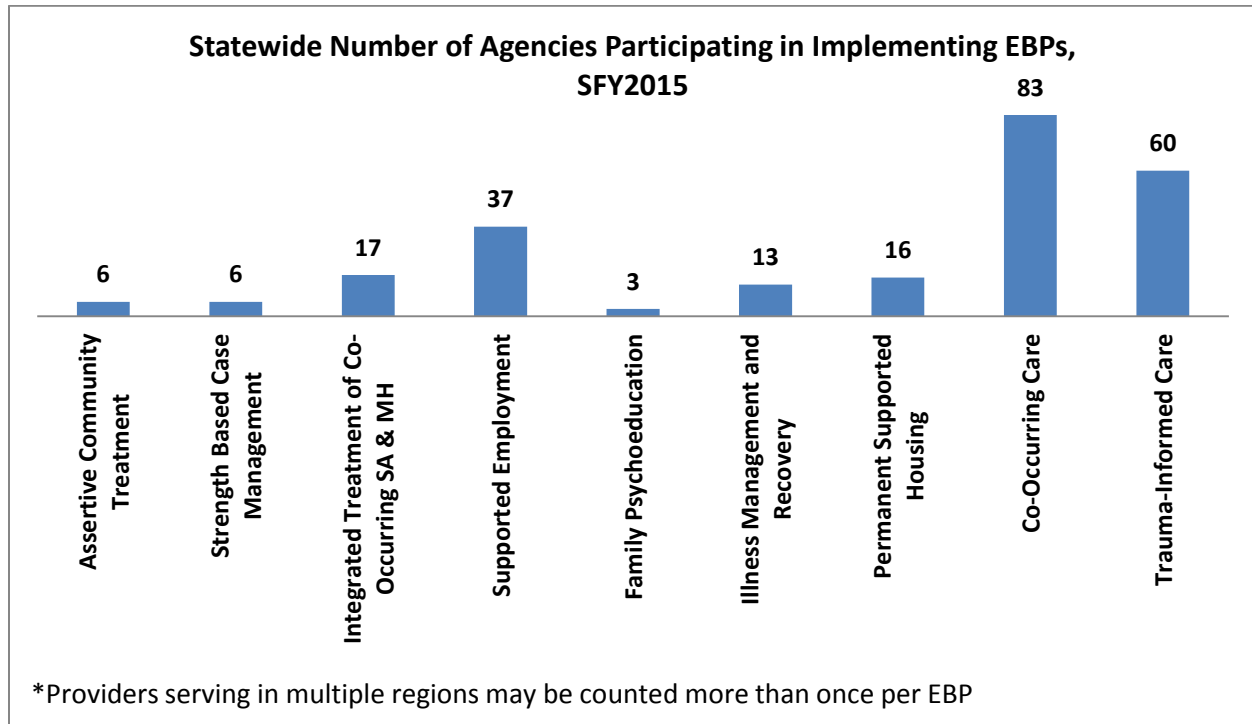
## TIMELINESS AND PROXIMITY: Number of Regions Meeting Core Service Access Standards (N=15 Regions)



## Service Quality

Data are from Regional Annual Plans and Self-Report by Regional CEOs.

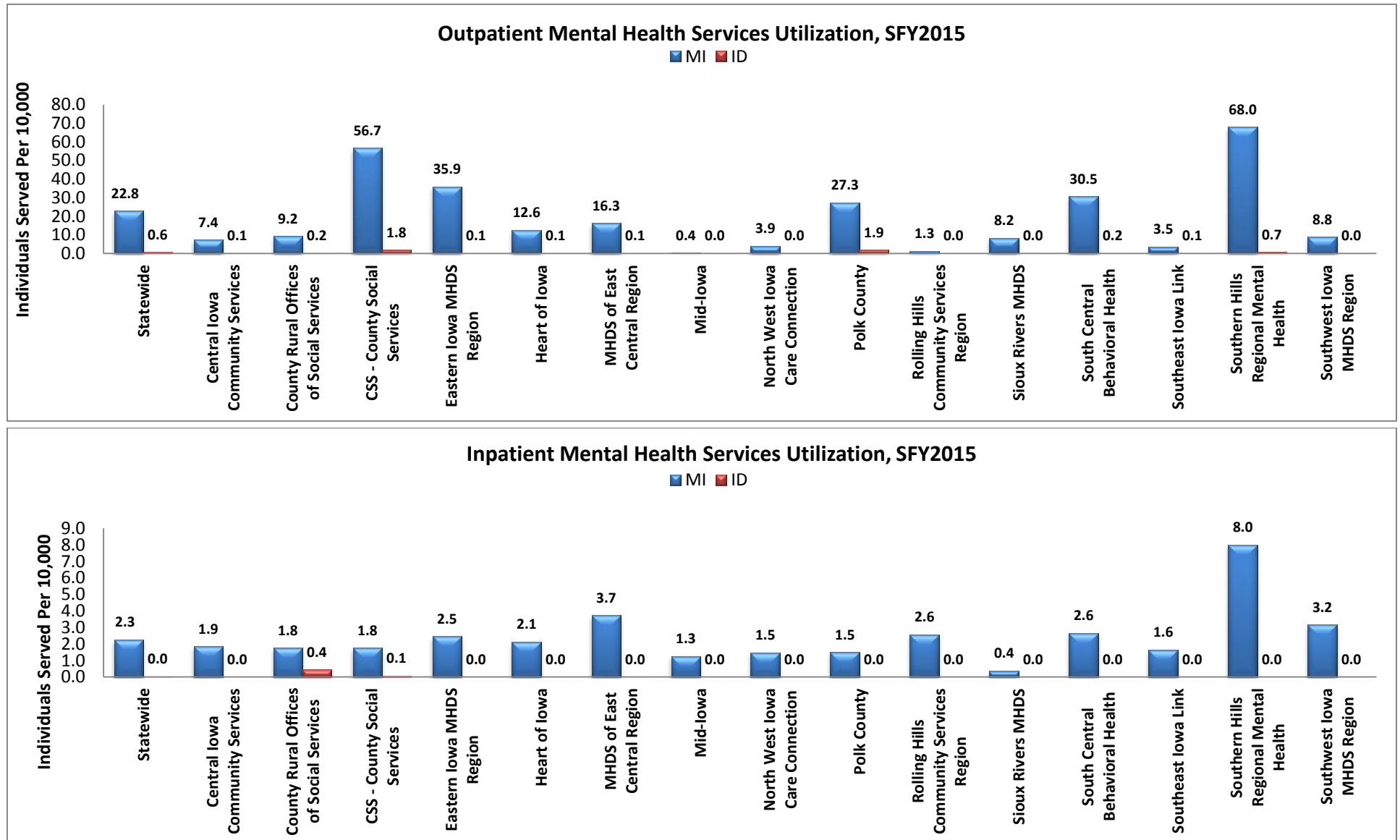
### Evidence-Based Practice (EBP) Implementation



# DISCUSSION DRAFT

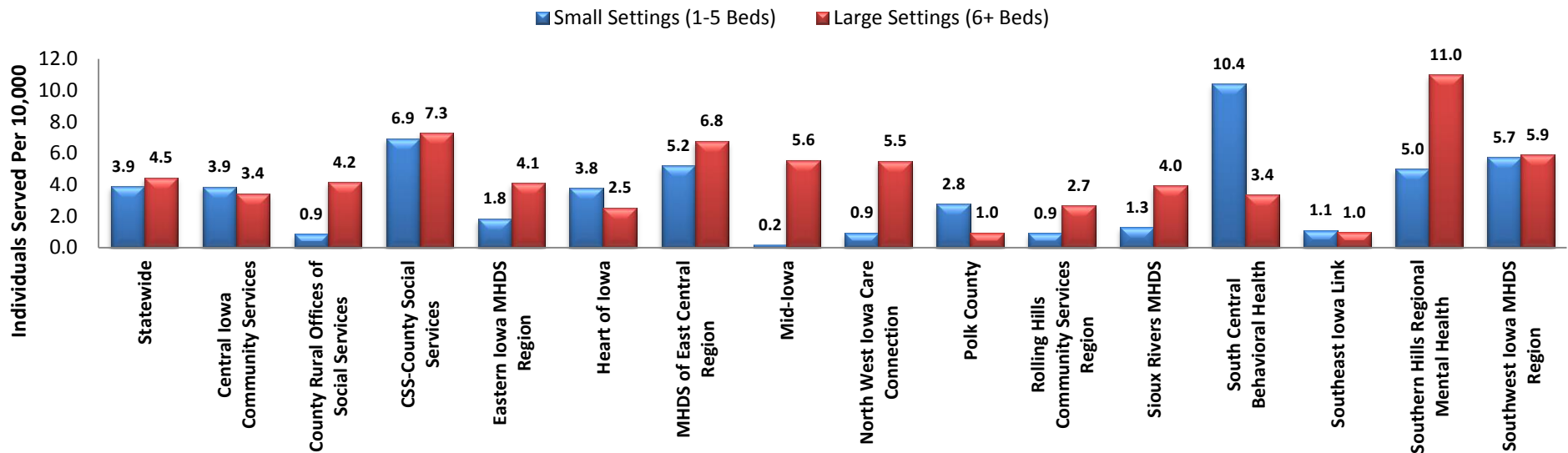
## Service Utilization

Data are from SFY2015 Regional Annual Submissions. SFY2015 Regional Annual Submission data excludes Medicaid only clients served.

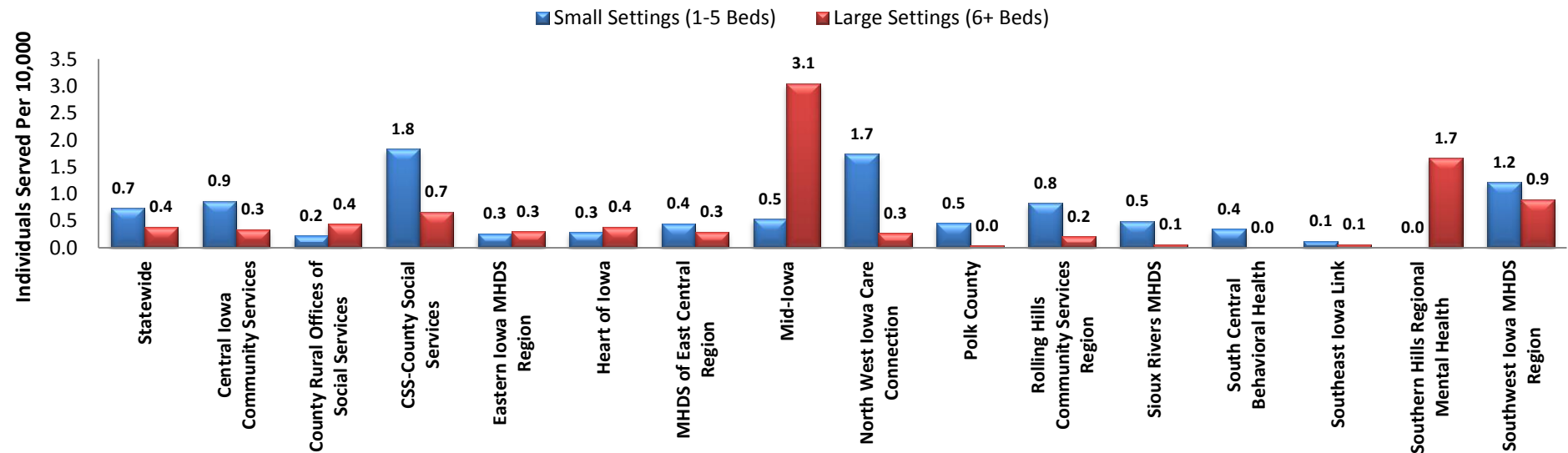


# DISCUSSION DRAFT

Statewide Utilization of Living Arrangements: Small vs Large Settings for Persons with MI, SFY2015



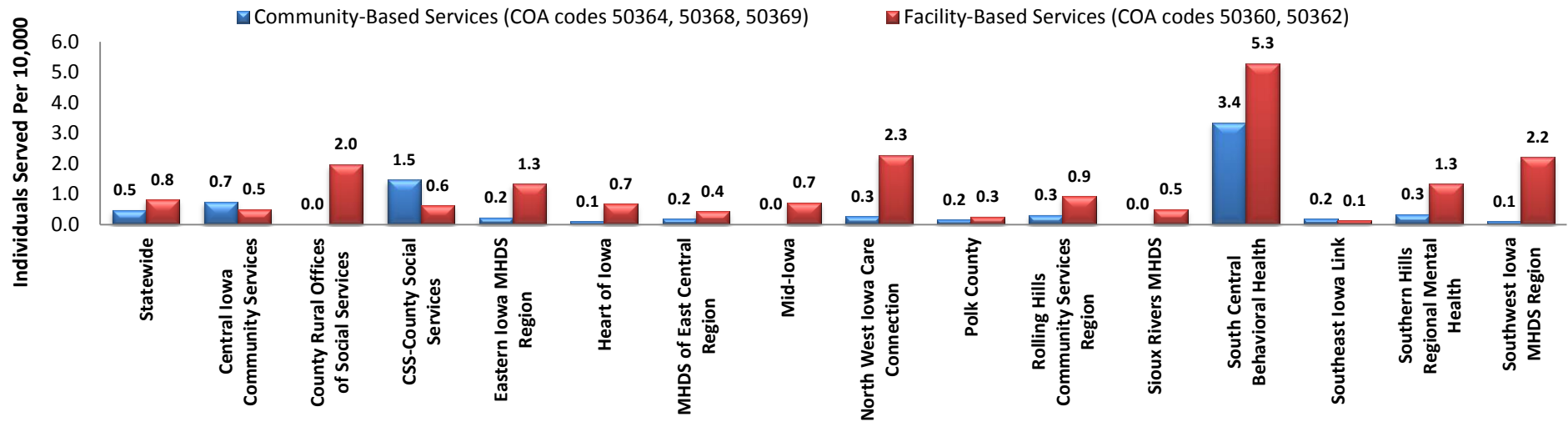
Statewide Utilization of Living Arrangements: Small vs Large Settings for Persons with ID, SFY2015





# DISCUSSION DRAFT

**Statewide Utilization of Vocational Services: Community-Based Vs Facility-Based Settings for Persons with MI, SFY2015**



**Statewide Utilization of Vocational Services: Community-Based Vs Facility-Based Settings for Persons with ID, SFY2015**

